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RESPONDERS TO PERIODONTAL DISEASE TREATMENT HAVE LOWER RISK FOR FUTURE CARDIOVASCULAR DISEASE THAN NON-RESPONDERS

Poster Contributions

Poster Hall B1

Saturday, March 14, 2015, 3:45 p.m.-4:30 p.m.

Session Title: Blood Pressure, Diabetes and Other Risk Factors

Abstract Category: 21. Prevention: Clinical

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Background: An association between periodontal disease (PD) and cardiovascular disease (CVD) has been confirmed in a number of studies. However, how treatment of PD affects this association has not been investigated in any large prospective study.

Methods: Non-responders were defined as having more than 20% remaining pockets ≥ 5 mm deep and bleeding on probing (BOP) $\geq 20\%$ one year after active treatment. This assessment was available in 5298 individuals referred to a specialized periodontal clinic. Fatal/non-fatal incidence of CVD (myocardial infarction, stroke and heart failure) was obtained from the Swedish cause of death register and the national hospital discharge register. Cox proportional hazard analysis was performed to analyse differences in future risk for CVD between responders and non-responders.

Results: During a median of 16.8 years follow-up (89740 PYAR), non-responders (19.9% of the sample) showed an increased incidence of CVD compared to responders to treatment (21.6 vs 16.3%, $p < 0.001$). When adjusting for age, sex, education level, smoking and baseline values for BOP, pockets ≥ 5 mm, attachment loss and number of teeth, the increased risk was 28% (95% CI 8.0-50, $p = 0.0041$).

Conclusion: Responders to periodontal treatment had a lower risk for future CVD compared to non-responders indicating that successful periodontal treatment might influence progression of subclinical CVD.